

FILED

MAY 25 2022

Mark C. McCartt, Clerk
U.S. DISTRICT COURT

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF OKLAHOMA

1 Anita Jean Hayes
2 Salinda Eve Hayes

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

1 SCOTT OWEN, ²Don Copeland,
3 Michael Kitchens, ⁴B. Underwood,
5 Kristen Davis, ⁶J. Cutler, ⁷J. Inman

(Write the full name of each defendant who is ^{see} attached being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Complaint for Violation of Civil
Rights
(Non-Prisoner Complaint)

Case No. 22CV-230 CVE-SH
(to be filled in by the Clerk's Office)

Jury Trial: Yes No
(check one)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in *forma pauperis*.

25 summaries
JEP

Defendants Cont. Page 1

⁸ B. Berens, ⁹ R. Blackard, ¹⁰ W. Jacobs,
¹¹ B. Wano, ¹² A. Witt, ¹³ A. Galanis,
¹⁴ Washington county sheriff's office,
¹⁵ Washington County Board of Commissioners

Plaintiffs Cont. Page 2

Salinda Eve Hayes
396821 W. 1350 Dr.
Dewey, Washington Co.
Oklahoma 74029
(918) 935-4363
Salieve32@gmail.com

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Anita Jean Hayes</u>
Street Address	<u>396821 W. 1350 Dr</u>
City and County	<u>Dewey WASHINGTON</u>
State and Zip Code	<u>OKLAHOMA 74029</u>
Telephone Number	<u>(918) 240-5731</u>
E-mail Address	<u>Ajhayes 717@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name	<u>SCOTT OWEN</u>
Job or Title (if known)	<u>COUNTY SHERIFF</u>
Street Address	<u>101 SW Adams Blvd</u>
City and County	<u>Bartlesville WASHINGTON</u>
State and Zip Code	<u>OKLA 74003</u>
Telephone Number	<u>(918) 337-2800</u>
E-mail Address (if known)	<u>Unknown</u>

Individual capacity

Official capacity

Defendant No. 2

Name	<u>Jon Copeland</u>
Job or Title	<u>Undersheriff</u>

(if known)

Street Address

101 SW Adams Blvd

City and County

Bartlesville WASHINGTON

State and Zip Code

OKLA 74003

Telephone Number

(918) 337-2800

E-mail Address

Unknown

(if known)

 Individual capacity Official capacity

Defendant No. 3

Name

Micahel Kitchens

Job or Title

Corrections Officer

(if known)

Street Address

101 SW Adams Blvd

City and County

Bartlesville WASHINGTON

State and Zip Code

OKLA 74003

Telephone Number

(918) 337-2800

E-mail Address

unknown

(if known)

 Individual capacity Official capacity

Defendant No. 4

Name

B. Underwood

Job or Title

Corrections Officer

(if known)

Street Address

611 SW Adams Blvd

City and County

Bartlesville WASHINGTON

State and Zip Code

OKLA 74003

Telephone Number

(918) 337-2800

E-mail Address

unknown

(if known)

 Individual capacity Official capacity

Defendants (cont. Page 3)

Defendant No 5.

Kristen Davis
Corrections Officer
621 SW Adams Blvd
Bartlesville WASHINGTON
OKLA 74003

(918) 337-2800 email unknown
✓ Official Capacity only

Defendant No. 6

J. Cutler
Corrections Officer
621 SW Adams Blvd
BARTLESVILLE WASHINGTON
OKLA 74003

(918) 337-2800 email unknown
✓ individual capacity ✓ official

Defendant No 7.

J. Inman
621 SW Adams Blvd
Bartlesville WASHINGTON
OKLA 74003
(918) 337-2800 email unknown

✓ individual capacity
✓ official capacity

Defendant No. 8.

B. Berens
621 SW Adams Blvd
Bartlesville Washington
OKLA 74003

(918) 337-2800 email unknown
✓ individual capacity
✓ official capacity

Defendant No. 9.

R. Blackard
621 SW Adams Blvd
Bartlesville Washington
OKLA 74003
(918) 337-2800 Email unknown

✓ individual capacity
✓ official capacity

Defendant No. 10

W. Jacobs
621 SW. Adams Blvd
Bartlesville Washington
OKLA 74003

(918) 337-2800 email unknown
✓ individual capacity
✓ official capacity

Defendant No. 11

B. Wano

601 SW Adams Blvd

BARTLESVILLE WASHINGTON

OKLA 74003

(918) 337-2800 Email unknown

✓ individual capacity

✓ official capacity

Defendant No. 12

A. Witt

611 SW Adams Blvd

BARTLESVILLE WASHINGTON

OKLA 74003

(918) 337-2800 email unknown

✓ individual capacity

✓ official capacity

Defendant No. 13

A. Galanis

611 SW Adams Blvd

BARTLESVILLE WASHINGTON

OKLA 74003

(918) 337-2800 Email unknown

✓ individual capacity

✓ official capacity

Defendant No. 14

WASHINGTON COUNTY SHERIFF'S OFFICE

611 SW Adams Blvd

BARTLESVILLE WASHINGTON

OKLA 74003

(918) 337-2800 email unknown

✓ OFFICIAL CAPACITY

Defendant No. 15

WASHINGTON COUNTY BOARD OF COMMISSIONERS

400 S. Johnstone Ave

BARTLESVILLE WASHINGTON

OKLA 74003

(918) 337-2820 email unknown

✓ OFFICIAL CAPACITY ONLY

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

Federal officials (a *Bivens* claim)
 State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

fourth, eighth, fourteenth amendments.

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

n/a

D. Section 1983 allows defendants to be found liable only when they have acted “under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia.” 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

EXACT DEFENDANT ACTED UNDER COLOR OF LAW IN THEIR
RESPECTIVE EMPLOYMENT AS CORRECTIONS OFFICER,
SHERIFF, Undersheriff, SHERIFF'S OFFICE, AND COUNTY BOARD.

III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. Where did the events giving rise to your claim(s) occur?

3916 477-1755 Washington County Jail
PO Box Washington County Bartlesville
OKLA 74029 74003

B. What date and approximate time did the events giving rise to your claim(s) occur?

January, 17, 2021 Between 11am and 1pm

C. What are the facts underlying your claim(s)? (For example: *What happened to you? Who did what? Was anyone else involved? Who else saw what happened?*)

SEE ATTACHED "FACTS OF CLAIM"

III. Statement of Claim

C.

Facts of Claim

- On January 17, 2021 at approximately 1 o'clock pm, Anita Jean Hayes was taken to the sallyport entrance of the Washington County jail and was dragged and forcefully removed from the deputy's vehicle while handcuffed.
- Anita is not resisting.
- She was put on the floor of a cell face down with her pelvis over a drain hole while Michael Kitchens with all of his bodyweight forced his knee into the center of her back.
- Handcuffs are removed.
- Anita is not resisting.
- Several corrections officers including B. Underwood proceeded to stand on Anita's ankles and wrists while Defendant Kitchens remained forcibly on the Plaintiff's back.
- Anita tells corrections officers that her wedding ring does not come off.
- The male corrections officer on Anita's left side bends her pinky finger and forces it out and backwards.
- Salinda can hear a male officer tell Anita that he is going to break her finger off.
- Anita tells corrections officers that they are breaking her finger and her back, she can't breathe with all of their weight on her, and they are killing her.
- Salinda Hayes is two cells down and can hear Anita saying that she needs medical attention and that they are killing her as well as the corrections officers laughing about causing Anita pain.

- The corrections officers are laughing and joking as they increase the amount of force.
- One male correction officer says that his “three year old acts better than this”.
- Anita is not resisting.
- All officers continue to use force until they are able to remove Anita's ring then they all leave.
- Anita requested medical attention and a facemask throughout which she was denied.
- Anita drags herself to the bench inside of the cell.
- Anita continues to tell the officers that they hurt her and needs medical attention and they have violated her rights.
- The officers ordered Anita to come out of the cell and she explained that she couldn't because they had broken her back.
- Officers finally brought what they described as a “party wagon” to remove Anita from the cell.
- Corrections officers forced Anita's injured hands and wrists to fingerprint her.
- Officers wheel Anita back to the cell in the party wagon.
- Salinda is asked to provide Anita's name and she refuses.
- Salinda is taken to a pod within the jail.
- Officers ask for Anita's name and she refuses to answer any questions.
- Anita repeatedly tells officers and anyone within proximity that her rights are being violated.
- Anita continues to ask for medical attention and a mask.
- B. Underwood jokes about how stubborn the Plaintiff is with the Plaintiff's wife Sailnda Hayes.
- Anita is wheeled out to the main booking area.
- Anita is wheeled out of the jail in the party wagon and into the passenger side of her car.
- Upon her release, Anita is immediately taken to the Emergency Room and her injuries diagnosed and documented.
- Both plaintiffs made numerous complaints to Sheriff Scott Owen, Undersheriff Jon Copeland, and Board of Commissioners all which went ignored.

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Anita: Post Traumatic Stress, Aggravated Anxiety with agoraphobia, ruptured and bulging discs in back, Nerve damage in pinky finger, wrists, ankle, back, and leg, bruising and lacerations on arms and legs, permanent bruising on ankle, suspected deep vein thrombosis in leg, wheelchair bound due to injuries,

SALUNDA: Post Traumatic Stress and Anxiety

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Deescalation Training for Jail staff & WCSO employees.

EASIER ACCESS TO COMPLAINT PROCESS WASHINGTON COUNTY

HOLD DEFENDANTS ACCOUNTABLE FOR THEIR ACTIONS.

PLAINTIFFS SEEKING COMPENSATORY AND PUNITIVE DAMAGES

IN THE AMOUNT OF \$21,000,000 FOR MEDICAL EXPENSES, LOST

INCOME, DAMAGE TO REPUTATION, HUMILIATION, PSYCHOLOGICAL INJURIES,

PHYSICAL INJURIES, CONTINUED AND ONGOING MEDICAL AND

MENTAL HEALTH CARE FOR THE PLAINTIFFS FOR LIFE, \$14,241.92 IN

OUT OF POCKET
TO DATE.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: May 25, 2022

Signature of Plaintiff Anita Jean Hayes

Printed Name of Plaintiff ANITA JEAN HAYES

Salinda Eve Hayes

B. For Attorneys

Date of signing: _____, 20 ____.

Signature of Attorney _____

Printed Name of Attorney _____

Bar Number _____

Name of Law Firm _____

Address _____

Telephone Number _____

E-mail Address _____